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|--|--------------------|---|--|---|----------|---|----------|---|--------------------|--|----------|--|----------|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) 001508-003480 | | | | | | | | | | | |
| CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)] I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____. Signature: _____ Name: _____ | | In re Application of : David Battat et al. | | | | | | | | | | | |
| | | Application Number : 10/055,349 Filed 01/25/02 | | | | | | | | | | | |
| | | For: SEAMED, CONFORMABLE BELT AND METHOD OF MAKING | | | | | | | | | | | |
| Group Art Unit : 3682 | | Examiner : Marcus Charles | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <table><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)</td><td>\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1,020.00)</td><td>\$ <u>1,020.00</u></td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1,590)</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1,080/\$2,160)</td><td>\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. 02/25/2005 MWOLDGE1 00000006 141138 10055349</p> <p><input type="checkbox"/> A check to cover the fee is enclosed. 01 FC:1253 1020.00 DA</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>14-1138</u></p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p><u>February 23, 2005</u> Date</p> <p> Signature Marc S. Kaufman, Reg. No. 35,212</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> | | | | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120) | \$ _____ | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) | \$ _____ | <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1,020.00) | \$ <u>1,020.00</u> | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1,590) | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1,080/\$2,160) | \$ _____ |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120) | \$ _____ | | | | | | | | | | | | |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) | \$ _____ | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1,020.00) | \$ <u>1,020.00</u> | | | | | | | | | | | | |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1,590) | \$ _____ | | | | | | | | | | | | |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1,080/\$2,160) | \$ _____ | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Total of <u>1</u> form is submitted. | | | | | | | | | | | | | |

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